Fill in this information to identify your case:	n7	Dog 1	Filed 07/01/10	Entered 07/01/19 15:23:35 age 1 of 61	Desc Main
United States Bankruptcy Court for the:					
Western District of Missour	i				
Case number (If known):	_ <b>\( \)</b>	ter you are to Chapter 7 Chapter 11 Chapter 12 Chapter 13	2		Check if this is an amended filing

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your	Dixie		
	government-issued picture identification (for example, your	First name	First name	
	driver's license or passport).	Ann Middle name	AC LU	
	Bring your picture identification to	McCollum	Middle name	
	your meeting with the trustee.	Last name	Last name	
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)	
2.	All other names you have used in the last 8 years	Dixie		
	-	First name	First name	
	Include your married or maiden names.	Ann Middle name	Middle name	
		McCollum	middle flame	
		Last name	Last name	
		Dixie		
		First name	First name	
		Ann Middle name		
		Meyers	Middle name	
		Last name	Last name	
3.	Only the last 4 digits of your Social Security number or	xxx-xx- <u>3</u> <u>3</u> <u>9</u> <u>7</u>	xxx - xx	
	federal Individual Taxpayer	OR	OR	
	Identification number (ITIN)	9xx - xx	9xx - xx	

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Middle Name First Name

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	☑I have not used any business names or EINs.	☐I have not used any business names or EINs.
	Include trade names and doing business as names	Business name	Business name
		Business name	Business name
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		2521 N. Benton Ave Number Street	Number Street
		Springfield, MO 65803 City State ZIP Code	City State ZIP Code
		<u>Greene</u> County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this	Check one:	Check one:
	district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408)
			·

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First Name	Middle	Name

	First Name	wilddie Name	Last Name				
Par	t 2: Tell the Court About Yo	ur Bankruptc	cy Case				
7.	The chapter of the Bankruptcy Code you are choosing to file under		. Also, go to the top of page 1 and check the appro 7 11 12	d by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy priate box.			
8.	How you will pay the fee	<ul> <li>✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).</li> <li>☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.</li> </ul>					
9.	Have you filed for bankruptcy within the last 8 years?	✓ No.  ☐ Yes. District  District  District	ict When ict When _	Case number  Case number  Case number  MM / DD / YYYY  Case number  MM / DD / YYYY			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?		orWhen	Case number, if known			
11.	Do you rent your residence?	✓ No. Go to	to line 12. your landlord obtained an eviction judgment again	st you?			

No. Go to line 12.

☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part

of this bankruptcy petition.

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First Name	Middle Name	Last Name	Page 4 of 61		,	

Par	t 3: Report About Any Busin	esses	You Own as a Sole Proprietor			
		<b>☑</b> No	o. Go to Part 4.			
12.	Are you a sole proprietor of any full- or part-time business?	_	s. Name and location of business			
	A sole proprietorship is a business you operate as an individual, and is					
	not a separate legal entity such as a corporation, partnership, or LLC.	Na	me of business, if any			
	If you have more than one sole	Nu	mber Street			
	proprietorship, use a separate sheet and attach it to this petition.	_				
		Cit	у	State	ZIP Code	
		Cl	neck the appropriate box to describe your bus	iness:		
			Health Care Business (as defined in 11 U.S	S.C. § 101(27A))		
			Single Asset Real Estate (as defined in 11	J.S.C. § 101(51B))		
		_	Stockbroker (as defined in 11 U.S.C. § 101(			
			Commodity Broker (as defined in 11 U.S.C.	§ 101(6))		
			None of the above			
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor?</i> For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	deadlir operation operation 11 U.S.    11 U.S.    No.    Ye	b. I am filing under Chapter 11, but I am N Bankruptcy Code.	es debtor, you must tax return or if any c NOT a small busine a small business del	attach your most recent balance of these documents do not exist these documents do not exist ess debtor according to the defendence of the definition according to the definition	ce sheet, statement of st, follow the procedure in finition in the in the Bankruptcy
14.	Do you own or have any	<b>√</b> No	).			
	property that poses or is alleged to pose a threat of	☐ Ye	s. What is the hazard?			
	imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it	needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?  Number	Street		
			City		State	ZIP Code

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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

# About Debtor 1:

You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition,

and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in

a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

l certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit

counseling because of: Incapacity. I have a mental illness or a mental

> deficiency that makes me incapable of realizing or making rational

decisions about finances. ☐ Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

First Name	Middle Nan

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Par	t 6: Answer These Question	ons for	Reporting Purposes						
16.	What kind of debts do you have?	16b.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  □ No. Go to line 16b.  ☑ Yes. Go to line 17.  Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  □ No. Go to line 16c.  □ Yes. Go to line 17.  State the type of debts you owe that are not consumer debts or business debts.						
17	Are you filing under Chapter 7'	· 🗆	No. I am not filing under (	Chanter 7	Go to line 18				
17.	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<b>V</b>	No. I am not filing under Chapter 7. Go to line 18.  Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  \[ \] No \[ \] Yes						
		$\overline{\mathbf{A}}$	1-49 🔲 50-99		1,000-5,000	<b>1</b> 2	5,001-50,000  50,000-100,000		
18.	How many creditors do you estimate that you owe?		100-199 200-999		10,001-25,000	_	fore than 100,000		
19.	How much do you estimate your assets to be worth?	<b>S</b>	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.	How much do you estimate your liabilities to be?  t 7: Sign Below	□ ☑	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Fo	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.    I St Dixie Ann McCollum   Dixie Ann McC								

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

JAMES PATRICK MORONEY JAMES PATRICK MORONEY, Attorney	Date 07/01/2019 MM / DD / YYYY
JAMES PATRICK MORONEY	
Printed name	
JAMES MORONEY LAW OFFICE	
Firm name	
836 S Pickwick	
Number Street	
Springfield	MO 65806
City	State ZIP Code
Contact phone <u>(417) 831-0606</u>	Email address moroneylaw@hotmail.com
23377	<u>MO</u>
Bar number	State

Fill in this information to	10 60777 og		Filed 07/01/10 Ente	orod 07/01/19 15:23:35	Desc Main
Debtor 1  Debtor 2 (Spouse, if filing)  United States Bankrup  Case number	Dixie First Name	Ann Middle Name Middle Name	McCollum  Last Name  Last Name  Western District of Missouri		Check if this is an amended filing
Official Form Schedule A		erty			12/15
fits best. Be as complet space is needed, attach	e and accurate as p a separate sheet to	oossible. If two moothis form. On th	asset only once. If an asset fits in more arried people are filing together, both the top of any additional pages, write your or Other Real Estate You	n are equally responsible for supplyin our name and case number (if known	ng correct information. If more
No. Go to Part 2 Yes. Where is the homestead	2. ne property? for Dixie Myers & c s, if available, or other ton Ave	children Wh	at is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other o has an interest in the property? Checker 1 only Debtor 2 only	Do not deduct secured amount of any secured Creditors Who Have C Current value of the entire property?  \$65,000.00  Describe the nature of as fee simple, tenancy estate), if known.	Current value of the portion you own?  (a) \$65,000.00  (b) your ownership interest (such by the entireties, or a life
			Debtor 1 and Debtor 2 only At least one of the debtors and another	(see instructions)	шишку ргорену

\$65,000.00

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here.....

Cars, ☐ N ☑ Ye		sport utility vehic	rest in any vehicles, whether they are registered or not? I nicle, also report it on Schedule G: Executory Contracts and cles, motorcycles	l Unexpired Leases.	
	Make: Model:	Dodge	Who has an interest in the property? Check one.  ✓ Debtor 1 only  Debtor 2 only	Do not deduct secured cla amount of any secured cla Creditors Who Have Clair	nims on Schedule D:
١	∕ear:	1995	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage: Other information:	165000	Check if this is community property (see instructions)	\$500.00	\$500.0
- 1	Model:	2002	<ul> <li>Debtor 2 only</li> <li>Debtor 1 and Debtor 2 only</li> <li>At least one of the debtors and another</li> </ul>	Current value of the entire property?	ms Secured by Property.  Current value of the portion you own?  \$2,000.0
P	Year: Approximate mileage: Other information:	150000	Check if this is community property (see instructions)	\$2,000.00	Ψ2,000.
3 N	Approximate mileage: Other information:  Make:	150000 Ford ZX2	instructions)  Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured cla amount of any secured cla	nims or exemptions. Put the lims on Schedule D:
3 M	Approximate mileage: Other information:	Ford	instructions)  Who has an interest in the property? Check one.	Do not deduct secured cla	nims or exemptions. Put th

\$2,550.00

Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages

you have attached for Part 2. Write that number here.....

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First Name	Middle Name	Last Name	raye 10 01		,

LIO VOLLOWN OF have any legal or equitable intere	and the same of the fellowing three 0	
bo you own or have any legal or equitable lines	erest in any of the following items?  Current va portion you Do not dedu claims or ex	own? act secured
6. Household goods and furnishings		
Examples: Major appliances, furniture, linens	ns, china, kitchenware	
☐ No		
Yes. Describe		\$1,000.00
7. Electronics		
electronic devices including cell ph	deo, stereo, and digital equipment; computers, printers, scanners; music collections; phones, cameras, media players, games	
☑ No ☐ Yes. Describe		
Callactible of callact		
<ol> <li>Collectibles of value</li> <li>Examples: Antiques and figurines; paintings,</li> </ol>	s, prints, or other artwork; books, pictures, or other art objects;	
stamp, coin, or baseball card colle	s, prints, or other artwork, books, pictures, or other art objects, illections; other collections, memorabilia, collectibles	
✓ No ☐ Yes. Describe		
Equipment for sports and hobbies		
Examples: Sports, photographic, exercise, an carpentry tools; musical instrumen	and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; ents	
☑ No ☐ Yes. Describe		
Tes. Describe		
0. Firearms		
Examples: Pistols, rifles, shotguns, ammuni	nition, and related equipment	
<b>☑</b> No		
Yes. Describe		
Ties. Describe		
1. Clothes	coats, designer wear, shoes, accessories	
1. Clothes  Examples: Everyday clothes, furs, leather co	coats, designer wear, shoes, accessories  btor and dependents	\$250.00
1. Clothes  Examples: Everyday clothes, furs, leather co	-	\$250.0
<ol> <li>Clothes         <ul> <li>Examples: Everyday clothes, furs, leather or</li> <li>No</li> <li>Yes. Describe</li> </ul> </li> <li>dothing for debtor</li> </ol> 2. Jewelry	-	\$250.0
<ol> <li>Clothes         <ul> <li>Examples: Everyday clothes, furs, leather or</li> <li>No</li> <li>Yes. Describe</li> </ul> </li> <li>dothing for debtor</li> </ol> 2. Jewelry	btor and dependents	\$250. <u>0</u>

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Middle Name

First Name

13.	Non-farm animals			
	Examples: Dogs, cats, birds	s, horses		
	<b>☑</b> No			
	Yes. Describe			
14.	Any other personal and hous	sehold items you did not already list, including any health aids you d	id not list	
	<b>₫</b> No			
	Yes. Describe			
15.		your entries from Part 3, including any entries for pages you have a		
	for Part 3. Write that numbe	r here	→	\$1,250.00
Par	rt 4: Describe Your Fina	ncial Assets		
Do	you own or have any legal or	equitable interest in any of the following?		Current value of the
				portion you own?  Do not deduct secured
				claims or exemptions.
16.	Cash			
		in your wallet, in your home, in a safe deposit box, and on hand when you	file your petition	
	✓ No □ Yes		Cash	
	_ 100		Odd:	
17.				
		¡s, or other financial accounts; certificates of deposit; shares in credit un s. If you have multiple accounts with the same institution, list each.	ions, brokerage houses, and othe	r
	No			
	<b>√</b> Yes			
		Institution name:		
17.1	. Checking account:	Great Southern	\$136.00	
17.2	2. Checking account:			
	-			
17.3	3. Savings account:			
17 /	. Savings account:			
17.4	s. Savings account.			
17.5	5. Certificates of deposit:			
17.6	6. Other financial account:			
17.7	'. Other financial account:			
17.8	Other financial account:			

	First Name Middle Name Cast Name
17.9	Other financial account:
18.	Bonds, mutual funds, or publicly traded stocks
	Examples: Bond funds, investment accounts with brokerage firms, money market accounts
	✓ No □ Yes
19.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture
	✓ No  ☐ Yes. Give specific information about them
20.	Government and corporate bonds and other negotiable and non-negotiable instruments
	Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.
	✓ No  ☐ Yes. Give specific information about them
21.	Retirement or pension accounts
	Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans
	<ul><li>No</li><li>✓ Yes. List each account separately.</li></ul>
Турє	of account: Institution name:
401(	k) or similar plan: employer-sponsored \$6,000.00
22.	Security deposits and prepayments
	Your share of all unused deposits you have made so that you may continue service or use from a company
	Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others
	☑ No □ Yes
23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)
	☑ No □ Yes
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).
	✓ No □ Yes
Instit	ution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

**√** No

☐ Yes. Give specific

information about them....

Case 19-60777-can7 Filed 07/01/19 Entered 07/01/19 15:23:35 Doc 1 Desc Main Debtor 1 Case number (if known). Page 13 of 61 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **√** No ☐ Yes. Give specific information about them.... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **√** No ☐ Yes. Give specific information about them.... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. Tax refunds owed to you **√** No ☐ Yes. Give specific information about Federal: them, including whether you State: already filed the returns and the tax years..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

**√** No

☐ Yes. Give specific information.......

Alimony:	
Maintenance:	
Support:	

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social

Security benefits; unpaid loans you made to someone else

**√** No

Give specific information	

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

**√** No

☐ Yes.

☐ Yes. Name the insurance company of each policy and list its value....

Company name:

Beneficiary: Surrender or refund value:

Divorce settlement: Property settlement:

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Dixie	Ann	McCollum.	<del>Page 14 o</del> f 61	Case number (if known	1)
First Name	Middle Name	Last Name	rage 14 01 01	`	•

32.		
	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.	
	<b>☑</b> No	
	Yes. Give specific information	
00		
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment  Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	<b>☑</b> No	
	Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights	
54.	to set off claims	
	<b>☑</b> No	
	Yes. Describe each claim	
35.	Any financial assets you did not already list	
	<b>☑</b> No	
	Yes. Give specific information	
36	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached	
50.	for Part 4. Write that number here	\$6,136.00
Par	t 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Pa	rt 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	✓No. Go to Part 6.	
	Yes. Go to line 38.	
		Current value of the portion you own?
		Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned	The state of the s
30.	No	
	Yes. Describe	
39.	Office equipment, furnishings, and supplies	
	Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic	devices
	<b>☑</b> No	
	Yes. Describe	

Filed 07/01/19 Entered 07/01/19 15:23:35 Doc 1 Debtor 1 Page 15 of 61 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade **√** No Yes. Describe...... 41. Inventory **√** No Yes. Describe...... 42. Interests in partnerships or joint ventures **√** No Yes. Describe...... 43. Customer lists, mailing lists, or other compilations ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe......

☐ Yes. Give specific information.....

for Part 5. Write that number here.....

\$0.00

**√** No

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached

✓ No. Go to Part 7.

Yes. Go to line 47.

Current value of the portion you own? Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

44. Any business-related property you did not already list

**√** No ☐ Yes.....

48. Crops-either growing or harvested

**√** No

☐ Yes. Give specific information.....

Entered 07/01/19 15:23:35 Doc 1 Filed 07/01/19 Debtor 1 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade **√** No ☐ Yes...... Farm and fishing supplies, chemicals, and feed **√** No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list **√** No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \$0.00 for Part 6. Write that number here..... Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **√** No Yes. Give specific information..... \$0.00 List the Totals of Each Part of this Form Part 1: Total real estate, line 2...... \$65,000.00 56. Part 2: Total vehicles, line 5 \$2,550.00 Part 3: Total personal and household items, line 15 \$1,250.00 Part 4: Total financial assets, line 36 \$6,136.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 60.

\$0.00

Copy personal property total ->

\$9,936.00

61.

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61......

Debtor 1 Case 19-60777-can7 Doc 1 Filed 07/01/19 Entered 07/01/19 15:23:35 Desc Main Middle Name Document Page 17 of 61 Case number (if known)

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

\$74,936.00

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Fill in this information t	to identify your case:			
Debtor 1	Dixie	Ann	McCollum	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	ptcy Court for the:	W	estern District of Missouri	
Case number				
(if known)				

#### Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt								
<ol> <li>Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.</li> <li>You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)</li> <li>You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)</li> <li>For any property you list on Schedule A/B that you claim as exempt, fill in the information below.</li> </ol>								
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption					
	Copy the value from Schedule A/B	Check only one box for each exemption.						
Brief description: homestead for Dixie Myers & children 2521 N. Benton Ave Springfield, MO 65803  Line from Schedule A/B: 1.1	\$65,000.00	\$2,176.00  100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.475					
Brief description: 1995 Dodge  Line from Schedule A/B: 3.1	\$500.00	\$500.00  100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(5)					
3. Are you claiming a homestead exemption of mo (Subject to adjustment on 4/01/22 and every 3 year  ✓ No  ☐ Yes. Did you acquire the property covered by th  ☐ No ☐ Yes	rs after that for cases filed on	•						

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Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:  2002 Nissan Extra  Line from Schedule A/B: 3.2  Brief description:  2002 Ford ZX2 not operable	\$2,000.00	\$2,000.00  100% of fair market value, up to any applicable statutory limit  \$50.00  100% of fair market value, up to	Mo. Rev. Stat. § 513.430.1(5)  Mo. Rev. Stat. § 513.430.1(5)
Line from Schedule A/B:3.3	-	any applicable statutory limit	
Brief description:  Household goods  Line from Schedule A/B:  6	\$1,000.00	\$1,000.00  100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
Brief description: clothing for debtor and dependents  Line from Schedule A/B: 11	\$250.00	\$250.00  100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
Brief description: Great Southern Checking account Line from	<u>\$136.00</u>	\$136.00  100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(3)
Schedule A/B:17 Brief description: employer-sponsored Line from Schedule A/B: 21	\$6,000.00	\$6,000.00  100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(10)(e)

Fill in this information	to identify your case:			Entorod (			
Debtor 1	<b>Dixie</b> First Name	Ann Middle Name	McCollum Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankru	uptcy Court for the:	<b>v</b>	Vestern District of Missour	<u>i                                      </u>			
Case number (if known)						Check if the amended	
Official Form	106D						
Schedule I	D: Credito	rs Who H	lave Claims S	Secure	by Prope	erty	12/15
. Do any creditors hav	ve ciaims secured by	/ your property?					
✓ Yes. Fill in all of the Part 1: List All Solution 2. List all secured contact and claim. If mo	the information below Secured Claims Claims. If a creditor have than one creditor I	as more than one seenas a particular claim	cured claim, list the creditors, list the other creditors in P to the creditor's name.	separately for	Column A Amount of claim	Column B  Value of collateral that supports	Column C Unsecured
✓ Yes. Fill in all of the Part 1: List All Signal	the information below Secured Claims Claims. If a creditor have than one creditor I	as more than one see has a particular claim ical order according	cured claim, list the creditor on, list the other creditors in Poto the creditor's name.	separately for art 2. As much	Column A  Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
✓ Yes. Fill in all of the Part 1: List All Signature 2. List all secured control each claim. If montain as possible, list the 2.1 Skakie, Jan Creditor's Name 2135 E. Foxboro Number Str	the information below Secured Claims Claims. If a creditor have than one creditor have claims in alphabet augh Dr.	as more than one see has a particular claim ical order according Describe t	cured claim, list the creditor : n, list the other creditors in P	separately for art 2. As much ne claim:	Column A  Amount of claim  Do not deduct the	Value of collateral that supports	Unsecured portion
✓ Yes. Fill in all of the Part 1: List All S  2. List all secured control each claim. If montain as possible, list the Creditor's Name  213 E. Foxboro	claims. If a creditor have than one creditor have claims in alphabet the claims in State Dr.  State ZIP	as more than one see has a particular claim ical order according to the decording to the de	cured claim, list the creditor on the creditor's name.  The property that secures the property t	separately for art 2. As much ne claim:	Column A  Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
Yes. Fill in all of the Part 1: List All Secured control each claim. If montain as possible, list the Part 1: List all secured control each claim. If montain as possible, list the Part 1: List all secured control each claim. If montain as possible, list the Part 2: List all secured control each claim. If montain a list all secured control each claim. If montain all eac	claims. If a creditor have than one creditor have claims in alphabet sugh Dr.  reet  State ZIP  lebt? Check one.	Describe t  As of the de  Code  Code  Dispute  Nature of  As more than one see	cured claim, list the creditor on the creditor's name.  The property that secures the property t	separately for art 2. As much ne claim:	Column A  Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
Yes. Fill in all of the Part 1: List All Secured ceach claim. If mo as possible, list the 2.1 Skakie, Jan Creditor's Name 2135 E. Foxboro Number Stranger Republic, MO 65 City  Who owes the dead Debtor 1 only Debtor 2 only Debtor 1 and 1 Market All least one of	claims. If a creditor have than one creditor have claims in alphabet state. State ZIP lebt? Check one.  Debtor 2 only if the debtors and anoticial claim relates to a	Describe t  As of the describe to Code  Code  Code  As of the describe to Conting Cont	cured claim, list the creditor in, list the other creditors in P to the creditor's name.  The property that secures the property of the claim is: Check all that apply the property of the propert	separately for art 2. As much ne claim:	Column A  Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
Yes. Fill in all of the Part 1: List All Secured ceach claim. If mo as possible, list the 2.1 Skakie, Jan Creditor's Name 2135 E. Foxboro Number Stranger Republic, MO 65 City  Who owes the dead Debtor 1 only Debtor 2 only Debtor 1 and 1 decease one of Check if this centre of the Part All Pa	claims. If a creditor have than one creditor have claims in alphabet sugh Dr.  reet  5738  State ZIP  lebt? Check one.  Debtor 2 only  f the debtors and anotoclaim relates to a lebt	As of the december of the research of the rese	cured claim, list the creditor on, list the other creditors in P to the creditor's name.  The property that secures the property that secures the property that secures the property date you file, the claim is: Check gent dated end lien. Check all that apply, seement you made (such as not car loan) ry lien (such as tax lien, meditary).	separately for art 2. As much ne claim:  ck all that apply.	Column A  Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

Add the dollar value of your entries in Column A on this page. Write that number here:

\$36,939.23

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First Name	Middle Na	me	<del>Document</del>	Page 21 o	of 61	(	

Pa	Additional Page  After listing any entries on t 2.3, followed by 2.4, and so	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any	
2.2	Discover Bank Creditor's Name	Describe the property that secures the claim:	\$7,720.00	\$0.00	\$7,720.00
	P.O. Box 30421  Number Street  Salt Lake City, UT 84130-0421  City State ZIP Code  Who owes the debt? Check one.  □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt  Date debt was incurred  07.17/2018	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number 3 4 3 6			
	Capital One Creditor's Name  15000 Capital One Dr Number Street Richmond, VA 23238 City State ZIP Code  Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt  Date debt was incurred 11/07/2018	Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number 6 7 6 4	\$1,567.91	\$0.00	\$1,567.91
	Remarks: will file motion to avoid judicial lier	1			
	Add the dollar value of your entries in Colu	ımn A on this page. Write that number here:	\$9,28	37.91	

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First Name	Middle Nam		Page 22 of 61	·	,

Pa	Additional Page  After listing any entries on to 2.3, followed by 2.4, and so	this page, number them beginning with forth.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.4	Capital One Bank, N.A. Creditor's Name	Describe the property that secures the claim:	\$2,754.33	\$0.00	\$2,754.33
	P.O.Box 6492 Number Street  Carol Stream, IL 60197-6492 City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Date debt was incurred  11/20/2018	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number 8 2 5 0			
2.5	Remarks: will file motion to avoid judicial lies  Home Point Finance	Describe the property that secures the claim:	\$62,824.00	\$65,000.00	\$0.00
	P.O. Box 619063           Number         Street	homestead for Dixie Myers & children 2521 N. Benton Ave Springfield, MO 65803			
	Dallas, TX 75261 City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent			
	Who owes the debt? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Unliquidated ☐ Disputed  Nature of lien. Check all that apply.  ☑ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
	Date debt was incurred 07/28/2016	Other (including a right to offset)			
	Remarks: needs \$4,000 repair foundation wo	Last 4 digits of account number 7 7 6 1			
	Add the dollar value of your entries in Colu	umn A on this page. Write that number here:	\$65,57	78.33	
	If this is the last page of your form, add the	e dollar value totals from all pages. Write that number	\$111,80	05.47	

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Part 2: List Others to Be Notified for a Debt That You Already Li	sted

to co	ollect from you for a debt you owe to someon	e else, list the cr	editor in Part 1, an	of that you already listed in Part 1. For example, if a collection agency is trying and then list the collection agency here. Similarly, if you have more than one are. If you do not have additional persons to be notified for any debts in Part 1,
1	Armstrong, Jeanine			On which line in Part 1 did you enter the creditor? 4
	Name			Last 4 digits of account number 7 2 5 0
	707 N. 2nd St. 306 Number Street			
	Saint Louis, MO 63102 City	State	ZIP Code	_
2	Blitt & Gaines P.C.			On which line in Part 1 did you enter the creditor? 3
	Name 707 N. 2nd Street 306			Last 4 digits of account number 6 7 6 4
	Number Street			_ _
	Saint Louis, MO 63102 City	State	ZIP Code	
3	Carrer, Douglas			On which line in Part 1 did you enter the creditor?1_
	Name 2125 S. Brentwood Blvd.			Last 4 digits of account number 0 0 9 3
	Number Street			_
	Springfield, MO 65804 City	State	ZIP Code	_
4				On which line in Port 1 did you enter the creditor?
	McNeile, James Name			On which line in Part 1 did you enter the creditor? 2  Last 4 digits of account number 3 4 3 6
	14701 E. 42nd St. Number Street			Last 4 digits of account number 3 4 3 6
	Independence, MO 64055		710.0	<del>-</del>
	City	State	ZIP Code	

Fill in this information to ic	dentify your case:	7 Dog 1	Filed 07/01/1	O Entered (	7/01/19 15	5:23:35	Desc	Main	
Debtor 1	<b>Dixie</b> First Name	Ann Middle Name	McCollum Last Name						
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name						
United States Bankrupto  Case number (if known)	ry Court for the:	W	estern District of Mis	souri			Check amende	f this is an ed filing	
Official Form 1 Schedule E/		ors Who	Have Uns	ecured Cl	aims				12/15
Be as complete and accurance executory contracts of Schedule G: Executory CD: Creditors Who Hold Continuation Page to Part 1: List All of N	or unexpired leases of contracts and Unexportants Secured by P this page. On the to	that could result bired Leases (Offi Property. If more a op of any additio	in a claim. Also list ex icial Form 106G). Do r space is needed, cop nal pages, write your	ecutory contracts on not include any credit y the Part you need, t	Schedule A/B: tors with partially fill it out, numbe	Property (0 y secured o	Official Form laims that a	106A/B) and re listed in So	d on chedule
possible, list the clair Part 1. If more than o	ity unsecured claims claim it is. If a claim h ns in alphabetical ord one creditor holds a p	s. If a creditor has as both priority ar der according to the particular claim, lie		list that claim here and u have more than two Part 3.	d show both prior	rity and non	priority amou	nts. As much	as
				·		Total claim	Priority amount	Nonprior amount	rity
Priority Creditor's N	ame		Last 4 digits of acc	t incurred?			_		
Number Stre	eet		apply.  Contingent	ile, the claim is: Che	ck all that				
Debtor 1 only Debtor 2 only Debtor 1 and I At least one of	the debtors and anot		government						

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First Name	Middle Nam

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List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ✓ Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim \$521.00 4.1 Last 4 digits of account number 6813 Amex Nonpriority Creditor's Name When was the debt incurred? 04/01/2017 P.o. Box 981537 As of the date you file, the claim is: Check all that apply. Number Street Contingent El Paso, TX 79998 Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only ☐ Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts ✓ Other. Specify Is the claim subject to offset? CreditCard **☑** No ☐ Yes \$2,870.00 4.2 Capital One Last 4 digits of account number 8522 Nonpriority Creditor's Name When was the debt incurred? 06/01/2015 15000 Capital One Dr As of the date you file, the claim is: Check all that apply. Number Street Contingent Richmond, VA 23238 Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims ☐ At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts ✓ Other. Specify Is the claim subject to offset? CreditCard **☑** No Yes \$1,684.00 4.3 **Capital One** Last 4 digits of account number 3946 Nonpriority Creditor's Name When was the debt incurred? 02/01/2015 15000 Capital One Dr As of the date you file, the claim is: Check all that apply. Number Street Contingent Richmond, VA 23238 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☐ Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts  $\mathbf{\Delta}$ Other. Specify Is the claim subject to offset? CreditCard

**☑** No Yes Case 19-60777-can7 Doc 1 Filed 07/01/19 Entered 07/01/19 15:23:35

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Dogganent Debtor 1 Case number (if known). First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim \$7,188.00 4.4 **Discover Financial** Last 4 digits of account number 3133 Nonpriority Creditor's Name When was the debt incurred? 10/01/2015 Po Box 15316 As of the date you file, the claim is: Check all that apply. Number Street Contingent Wilmington, DE 19850 State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or ☐ Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts ☑ Other. Specify Is the claim subject to offset? CreditCard **☑** No ☐ Yes \$661.00 4.5 **Discover Financial** Last 4 digits of account number 9437 Nonpriority Creditor's Name When was the debt incurred? 10/01/2015 Po Box 15316 As of the date you file, the claim is: Check all that apply. Number Street Contingent Wilmington, DE 19850 Unliquidated ZIP Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims ☐ At least one of the debtors and another Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts ✓ Other. Specify Is the claim subject to offset? CreditCard **☑** No ☐ Yes \$122.00 I C System Inc Last 4 digits of account number 6446 Nonpriority Creditor's Name When was the debt incurred? 08/01/2018 Po Box 64378 As of the date you file, the claim is: Check all that apply. Number Street Contingent Saint Paul, MN 55164 Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☐ Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only

**☑** No ☐ Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim is for a community debt

similar debts

Other. Specify

CollectionAttorney

 $\sqrt{}$ 

divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other

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Debtor 1 Dixie Ann DOG

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Case number (if known)

First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim \$1,882.00 4.7 **Matco Tools** Last 4 digits of account number 8605 Nonpriority Creditor's Name When was the debt incurred? 02/02/2016 4403 Allen Rd As of the date you file, the claim is: Check all that apply. Number Street □ Contingent Stow, OH 44224 City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☐ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims ☐ At least one of the debtors and another Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts **☑** Other. Specify Is the claim subject to offset? **☑** No ☐ Yes \$32,103.00 4.8 **US Deptartment of Education/Great Lakes** Last 4 digits of account number 8581 Nonpriority Creditor's Name When was the debt incurred? 03/01/2012 Po Box 7860 As of the date you file, the claim is: Check all that apply. Number Street Contingent Madison, WI 53707 Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only Student loans Debtor 2 only

similar debts

Other. Specify

Educational

Obligations arising out of a separation agreement or

divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

✓ No ☐ Yes

☐ At least one of the debtors and another

Check if this claim is for a community debt

Case 19-60777-can7 Doc 1 Filed 07/01/19 Entered 07/01/19 15:23:35 Desc Main Dixie Ann Page 28 of 61 Case number (if known)

Debtor 1

First Name Middle Name Last Name

Case number (if known) \_

Part 4. Add	the Amounts for Each Type of Unsecured Claim				
	nounts of certain types of unsecured claims. This information is ecured claim.	s for s	tatist	ical reporting purposes only. 28 U.S.C	C. §159. Add the amounts for each
				Total claim	
Total claims	6a. Domestic support obligations	6a.		\$0.00	
from Part 1	6b. Taxes and certain other debts you owe the government	6b.		\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.		\$0.00	
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00	
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.		\$0.00	
				Total claim	
Total claims	6f. Student loans	6f.		\$0.00	
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00	
	<ol><li>Other. Add all other nonpriority unsecured claims. Write that amount here.</li></ol>	6i.	+	\$47,031.00	
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.		\$47,031.00	

Fill in this information	to identify your case:		Filed 07/01/10 Ex	stored 97/01/19 15	5:23:35	Desc Main	
Debtor 1	Dixie	Ann	McCollum				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankr	uptcy Court for the:	w	estern District of Missouri				
Case number (if known)						Check if this is an amended filing	
Be as complete and a	ccurate as possible	. If two married peop	acts and Unex ole are filing together, both are e es, and attach it to this page. Or	qually responsible for supp	olying correct		
1. Do you have any	executory contract	s or unexpired leases	s?				
✓ No. Check thi	s box and file this forr	n with the court with y	our other schedules. You have no	othing else to report on this fo	orm.		
Yes. Fill in all	of the information bel	low even if the contra	cts or leases are listed on Sched	lule A/B: Property (Official Fo	orm 106A/B).		
		•	nave the contract or lease. Then in the instruction booklet for more		,		
70111010 10436, 061	. ,					cpired leases.	

Person or company with whom you have the contract or lease State what the contract or lease is for 2.1 Name Number Street City State ZIP Code 2.2 Name Street Number City State ZIP Code 2.3 Name Number Street City ZIP Code State 2.4 Name Street Number City ZIP Code State 2.5 Name Number Street City State ZIP Code

Fill	in this information t	o identify your case:		Filed 07/01/10	Entered 97/01/	/19 15:23:35	Desc Main
П	ebtor 1	Dixie	Ann	McCollum			
		First Name	Middle Name	Last Name			
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name			
U	nited States Bankru	otcv Court for the:	w	estern District of Missouri			
С	ase number known)						Check if this is an amended filing
Of	ficial Form	106H					
So	chedule F	 H: Your Co	odebtors				12/15
botl	n are equally respo	nsible for supplying	g correct information		copy the Additional Pa	ige, fill it out, and nu	rried people are filing together, mber the entries in the boxes on nswer every question.
	☐ No ☑ Yes Within the last 8 y	ears, have you live , New Mexico, Puert	d in a community pro	do not list either spouse as a operty state or territory? (Congton, and Wisconsin.)	,	es <i>and territorie</i> s inclu	de Arizona, California, Idaho,
	_		o or logal oquivalent	live with you at the time?			
	□ No	bouse, former spous	e, or legal equivalent	iive with you at the time:			
	Yes. In which	n community state or	territory did you live?		Fill in the nam	e and current addres	s of that person.
	Name						
	Number	Street					
	City		State ZIP Code				
3.	codebtor only if th	nat person is a guar	rantor or cosigner. N	ur spouse as a codebtor if y flake sure you have listed th chedule D, Schedule E/F, or	ne creditor on Schedule	e D (Official Form 10	on shown in line 2 again as a 6D), <i>Schedule E/F</i> (Official
	Column 1: Your co	debtor			Column 2:	The creditor to whon	n you owe the debt
						I schedules that apply	

Official Form 106H Schedule H: Your Codebtors page 1 of 1

ZIP Code

State

Myers II, Calvin Lee

1510 N, Lexington Number Street

Springfield, MO 65803
City

Schedule D, line 2, 2, 2.1, 2.2, 2.4

Schedule E/F, line 4.3, 4.5, 4.6, 4.7

☐ Schedule G, line \_

		10 60777	00n7 D00 1 F	ilod 07/01/1		Entorod	<b>-</b> 07/01/1	9 15:23:35	Desc N	∕lain	
Fill	l in this information to	identify your cas	se:								
D	ebtor 1	Dixie	Ann	McCollum							
		First Name	Middle Name	Last Name							
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name				Check if	this is:		
	-								mended filing		
U	Inited States Bankrup	otcy Court for the:	west	ern District of Mis	souri			_	oplement showi	ng postpetition	
_	case number fknown)									s of the following d	ate
	•							MM	/ DD / YYYY	_	
		4001						IVIIVI /	00/1111		
<u>O</u> 1	fficial Form	<u> 1061</u>									
So	chedule I:	Your In	come							12/1	5
spo add	use is not filing with	h you, do not inc your name and c	filing jointly, and your spo clude information about yo ase number (if known). Ar	our spouse. If mor	re space						
1.	Fill in your employ information.	ment		Debtor	1			Debto	r 2 or non-filin	ng spouse	
	If you have more that attach a separate p	•	Employment status	<b>✓</b> Employed	l 🔲 Not	Employed		☐ Employe	ed 🗹 Not Empl	oyed	
	information about a employers.	ut additional	Occupation	Production C	Production Operator						_
	Include part time, s	easonal or	Employer's name	Penmac Staf	ffing						
	self-employed work		Employer's address								
	Occupation may incor homemaker, if it		Employer's address	447 South Av Number Stre				Number S	treet		_
				-							_
				Springfield, N	MO 658	06					_
				City		State	Zip Code	City	Sta	ate Zip Code	
			How long employed the	re? 3 months		_					
Pa	art 2: Give Deta	ails About Mo	nthly Income								
	Estimate monthly are separated.	income as of the	e date you file this form. If	you have nothing t	o report	for any line	, write \$0 in th	ne space. Include	your non-filing	spouse unless you	
	If you or your non-fi		more than one employer, co	ombine the informa	ition for a	all employei	rs for that pers	son on the lines b	elow. If you nee	ed more space,	
						For	Debtor 1	For Debtor 2			
2.			nd commissions (before a ulate what the monthly wage		2.		\$2,865.22		\$0.00		
3.	Estimate and list r	monthly overtime	е рау.		3.	+	\$0.00	+	\$0.00		

4. Calculate gross income. Add line 2 + line 3.

Case 19-607		1 Filed 07/01			c Main
Dixie	Ann	D McCollum.	<del>Page 32 o</del> f 61	Case number (if known)	
First Name	Middle Name	Last Name	1 age 32 01 01		

			For Debtor		For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$2,865.22		\$0.00	
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$433.48	_	\$0.00	
	5b. Mandatory contributions for retirement plans	5a. 5b.	\$112.66		\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	_	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	_	\$0.00	
	5e. Insurance	5e.	\$879.80	_	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	_	\$0.00	
	5g. <b>Union dues</b>	5g.	\$0.00	_	\$0.00	
	5h. Other deductions. Specify: See additional page	5h.	+ \$81.08	<u>-</u>	F\$0.00_	
	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$1,507.02		\$0.00	
	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$1,358.20	-	\$0.00	
	List all other income regularly received:		Ψ1,000.20	-	φο.ου_	
	•					
	8a. Net income from rental property and from operating a business, profession, or farm					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8a.	\$0.00	_	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8b.	\$0.00	-	\$0.00	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	90	\$450.00		\$0.00	
	8d. Unemployment compensation	8c.	\$0.00	_	\$0.00	
	8e. Social Security	8d.	\$0.00		\$0.00	
	8f. Other government assistance that you regularly receive	8e.	<u> </u>	_	<u> </u>	
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00	_	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	_	\$0.00	
	8h. Other monthly income. Specify:	8h.	+ \$0.00	<u>-</u>	\$0.00	
).	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$450.00	7 [	\$0.00	
	Calculate monthly income. Add line 7 + line 9.			 [		
	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$1,808.20	<u> </u>	\$0.00	<b>=</b> \$1,80
1.	State all other regular contributions to the expenses that you list in Schedule	J.				
	Include contributions from an unmarried partner, members of your household, your of friends or relatives.	lepende	ents, your roommates,	and oth	ner	
	Do not include any amounts already included in lines 2-10 or amounts that are not a	vailable	to pay expenses lister	d in <i>Scl</i>	nedule J.	
	Specify:				11. +	\$0.0
	Add the amount in the last column of line 10 to the amount in line 11. The resu amount on the Summary of Your Assets and Liabilities and Certain Statistical Inform		•	ome. V	Vrite that 12.	\$1,808
						Combined monthly incom
	Do you expect an increase or decrease within the year after you file this form?  No.  Yes. Explain:					

Debtor 1 Case 19-60777-can7 Doc 1 Filed 07/01/19 Entered 07/01/19 15:23:35 Desc Main Debtor 1 First Name Middle Name Case Name Page 33 of 61

1. Employment information for Debtor 1
Occupation Office
Employer's name Mediacom
Employer's address One Mediacom Way
Number Street

Chester, NY 10918
City State Zip Code

How long employed there? 1 year

Amount

Sh. Other Deductions For Debtor 1

Fi	Il in this information to	identify your case:	n/ Doo 1		31/10 Entered ()	//01/19 15:2:	3:35 Desc Mai	n
	Debtor 1	Dixie First Name	Ann Middle Name	McCollum Last Name		Check if this is:		
	Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		An amended fi	iling showing postpetition	
ι	Jnited States Bankrup	tcy Court for the:		Western District o	of Missouri		ome as of the following da	ite:
	Case number if known)					MM / DD / YY	YY	
0	fficial Form	<u>106J</u>						
S	chedule J	: Your Ex	penses					12/15
nee	eded, attach another	sheet to this form.			ther, both are equally respo write your name and case r			more space is
		Your Household						
1.	□No	or 2 live in a separa		, Expenses for Sep	parate Household of Debtor 2.			
2.	Do you have depe	ndents?	□No					
	Do not list Debtor 1 Debtor 2.	and		nis information for	Dependent's relationship Debtor 1 or Debtor 2	to Dependage	dent's Does depen with you?	dent live
	Do not state the dep	pendents' names.	each depende	ent	Child	16		Voc
					Child	12	\No. \ <b>\I</b>	
								Yes.
3.	Do your expenses of people other that your dependents?	an yourself and	<b>√</b> No □Yes					165.
Р	·	Your Ongoing M	lonthly Expen	ses				
					ng this form as a supplement the top of the form and fill			s of a date after
	clude expenses paid uch assistance and h						Your expenses	
4.	The rental or home ground or lot.	e ownership expens	es for your reside	<b>ence.</b> Include first m	nortgage payments and any r	ent for the 4.	\$66	69.00
	If not included in li	ine 4:						
	4a. Real estate taxe	s				4a.		60.00
	4b. Property, homeo	owner's, or renter's i	nsurance			4b.		\$0.00
	4c. Home maintena	nce, repair, and upke	ep expenses			4c.		\$0.00

4d. Homeowner's association or condominium dues

4d.

\$0.00

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First Name

Middle Name

	You	r expenses
Additional mortgage payments for your residence, such as home equity loans	5	
Utilities:		
6a. Electricity, heat, natural gas	6a	\$100.00
6b. Water, sewer, garbage collection	6b	\$20.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$50.00
6d. Other. Specify:	6d.	\$0.00
Food and housekeeping supplies	7.	\$550.00
Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9.	\$0.00
). Personal care products and services	10.	\$25.00
. Medical and dental expenses	11.	\$0.00
<ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ol>	12.	\$200.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$25.00
Charitable contributions and religious donations	14.	\$0.00
<ol> <li>Insurance.</li> <li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li> </ol>		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$100.00
15d. Other insurance. Specify:	15d.	\$0.00
Specify:	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	
17b. Car payments for Vehicle 2	17b	
17c. Other. Specify:	17c	
17d. Other. Specify:	17d	
<ol> <li>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</li> </ol>	18.	\$0.00
Other payments you make to support others who do not live with you.  Specify:	19.	\$0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a.	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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First Name Middle Name

21.	Other. Specify:	21. +_	\$0.00
22.	Calculate your monthly expenses.		
	22a. Add lines 4 through 21.	22a	\$1,739.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b	\$0.00
	22c. Add line 22a and 22b. The result is your monthly expenses.	22c	\$1,739.00
23.	Calculate your monthly net income.		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a	\$1,808.20
	23b. Copy your monthly expenses from line 22c above.	23b	\$1,739.00
	23c. Subtract your monthly expenses from your monthly income.		*
	The result is your monthly net income.	23c	\$69.20
24.	Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
	✓ No.  Yes.  None		

Fill in this information	to identify your case:	on7 Doo 1	Filed 07/01/10	Entered (	7/01/19 15:23:3	35 D	esc Main
Debtor 1	Dixie	Ann	McCollum				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankı	ruptcy Court for the:	V	Vestern District of Miss	ouri			
Case number (if known)							Check if this is an amended filing
Official Forn	n 106Sum						
Summary	of Your As	ssets and	l Liabilities	and Cer	tain Statisti	cal	
Informatio	n						12/1
and check the box at							nust fill out a new <i>Summar</i>
							Your assets
							Value of what you own
1. Schedule A/B: P	Property (Official Form	106A/B)					<b>405</b> 000 00
1a. Copy line 55,	Total real estate, from	Schedule A/B					\$65,000.00
1b. Copy line 62,	Total personal property	, from Schedule A/B	l				\$9,936.00
1c. Copy line 63,	Total of all property on	Schedule A/B					\$74,936.00
Part 2: Summa	rize Your Liabiliti	es					
							Your liabilities Amount you owe
			erty (Official Form 106D) the bottom of the last page		dule D		\$111,805.47
	reditors Who Have Unstallations of the latest temperature of the lates	•	icial Form 106E/F) ms) from line 6e of <i>Sche</i>	dule E/F			\$0.00
3b. Copy the total	claims from Part 2 (no	onpriority unsecured	claims) from line 6j of So	chedule E/F			<b>+</b> \$47,031.00
					Your total liab	oilities	\$158,836.47
Part 3: Summa	rize Your Income	and Expenses					
4. Schedule I: Your I	ncome (Official Form 1	1061)					
			e I				\$1,808.20

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$1,739.00

Debtor 1

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Part 4: Answer These Questions for Administrative and Statistical Records		
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court v  Yes	with your other schedules.	
<ul> <li>7. What kind of debt do you have?</li> <li>Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primar family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.</li> <li>Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this form to the court with your other schedules.</li> </ul>	§ 159.	
<ol> <li>From the Statement of Your Current Monthly Income. Copy your total current monthly income from Office Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.</li> </ol>	ial	\$3,000.38
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$0.00	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
9d. Student loans. (Copy line 6f.)	\$0.00	
9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00	
9g. <b>Total</b> . Add lines 9a through 9f.	\$0.00	

Fill in this information to	identify your case:				O ± / ± O ± O . C O	Desc Main	
Dobtor 1							
Debtor 1	Dixie	Ann	McCollum				
Dobtor 2	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankrupt	cy Court for the:	<b>W</b>	estern District of Mi	issouri			
Case number (if known)					[	Check if this is an amended filing	
Official Form	106Dec						
Declaration	About a	n Individu	ıal Debtor	's Schedule	S		12/15
If two married people are	e filing together, b	oth are equally resp	onsible for supplyir	ng correct information.			
years, or both. 18 U.S.C. §			cont iii iiiioo ap to vi	250,000, or imprisonment	. ro. up to 20		
Sign Belo	w						
		who is NOT an attorr	ney to help you fill o	ut bankruptcy forms?			
	to pay someone				on Preparer's Notice, Dec	claration, and Signature	

Date 07/01/2019 MM/ DD/ YYYY

Date \_\_\_\_\_

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Fill in this information	to identify your case:			
Debtor 1	Dixie	Ann	McCollum	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	iptcy Court for the:	W	estern District of Missouri	
Case number (if known)				

### Official Form 107

## Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

☐ Married ☑ Not married					
uring the last 3 years	, have you lived anywhere o	other than where you live n	ow?		
<b>1</b> No					
Yes. List all of the pl	aces you lived in the last 3 ye	ears. Do not include where y	ou live now.		
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
			Same as Debtor 1		Same as Debtor 1
		From	Number Street		From
umber Street		To	Number Street		To
ity	State ZIP Code	_	City	State ZIP Code	_
			☐ Same as Debtor 1		☐ Same as Debtor 1
		From	N. J. O. J.		From
umber Street		To	Number Street		To
ity	State ZIP Code	_	City	State ZIP Code	_

			Docume	ent Page 41 of	61			
Debtor 1	Dixie	Ann Middle Norm	McCollum Lost Name		Case number (if kno	wn)		
	First Name	Middle Nam	e Last Name					
3 Within th	ne last 8 vears, did vou	ever live with a	spouse or legal equivale	ent in a community property	state or territory?(Commu	nity property states and territories		
				Rico, Texas, Washington, and V		my property dialog and termioned		
<b>√</b> No								
Yes. N	Make sure you fill out <i>Sc</i>	chedule H: Your	Codebtors (Official Form	106H).				
Part 2: E	xplain the Sources	s of Your Inc	come					
Fill in the to	tal amount of income yo	ou received from	n all jobs and all businesse	ess during this year or the two es, including part-time activities t it only once under Debtor 1.		,		
□ No	3,.		<b>,</b>	,				
	Fill in the details.							
_		ſ	Debtor 1		Debtor 2			
		5	Sources of income	Gross Income	Sources of income	Gross Income		
		C	Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)		
	From January 1 of current year until the date you filed for bankruptcy:	until the	Wages, commissions, bonuses, tips	\$18,027.00	☐ Wages, commissions, bonuses, tips			
			Operating a business		Operating a business			
	calendar year: 1 to December 31, 2018		Wages, commissions, bonuses, tips	\$24,838.00	☐ Wages, commissions, bonuses, tips			
(bariaary	) to Boodinsol 01, <u>2010</u>		Operating a business		Operating a business			
	calendar year before that 1 to December 31, 2017		Wages, commissions, bonuses, tips	\$28,838.00	☐ Wages, commissions, bonuses, tips			
(January	1 to December 31, <u>2011</u>		Operating a business		Operating a business			
Include incorpayments; phave income	ome regardless of wheth	er that income i interest; divide	nds; money collected from	ner income are alimony; child su		nployment, and other public benefi ou are filing a joint case and you		
103.1	illi ili tile details.		Debtor 1		Debtor 2			
			Sources of income	Gross income from each	Sources of income	Gross Income from each		
			Describe below.	source	Describe below.	Gross Income from each source		
				(before deductions and exclusions)		(before deductions and exclusions)		
	nuary 1 of current year filed for bankruptcy:	until the						
		_						

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Case 19-60777-can7

r 1				Docum	ciii Tage 42	of 61	
	Dixie First N		Ann Middle Name	McCollum Last Name		Case number (ii	f known)
ar loot o	olondor vo						
	<b>alendar ye</b> 1 to Decem	<b>:ar:</b> nber 31, <u>2018</u>	 3 )			_	<u> </u>
,		Υ	<u></u>				
For the c	alendar ve	ear before tha	. <del></del>				
	-	nber 31, <u>2017</u>				_	
		Y	YYYY				
rt 3: Li	st Certa	ain Paymer	nts You Made E	Before You Filed f	for Bankruptcy		
Are either	r Debtor 1'	's or Debtor 2	's debts primarily o	consumer debts?			
□No.						ined in 11 U.S.C. § 101(8) as	s "incurred by an
				or household purpose. nkruptcv. did vou pav a	." Iny creditor a total of \$6,82	5* or more?	
	ŭ	to to line 7.	•	, ,, , , ,	•		
	☐Yes.					ore payments and the total a ild support and alimony. Also	
		creditor. Do payments to	not include payme an attorney for this	ents for domestic suppo bankruptcy case.	ort obligations, such as ch	ild support and alimony. Also	
<b>☑</b> Yes.	* Subject	creditor. Do payments to to adjustment	not include payme an attorney for this on 4/01/22 and even	ents for domestic suppo bankruptcy case.	ort obligations, such as ch	ild support and alimony. Also	
<b>√</b> 1Yes.	* Subject  Debtor 1  During the	or Debtor 2 of e 90 days before to line 7.  List below earth and the control of t	not include payme an attorney for this ton 4/01/22 and even to both have primore you filed for bar ach creditor to whom or domestic support	ents for domestic supports bankruptcy case.  ery 3 years after that for arily consumer debts on the support of	ort obligations, such as chor cases filed on or after the s.  any creditor a total of \$600 food or more and the total child support and alimony.	ild support and alimony. Also e date of adjustment.  or more?  amount you paid that creditor Also, do not include paymen	o, do not include  To not include ts to an attorney for
<b>√</b> 1Yes.	* Subject  Debtor 1  During the	or Debtor 2 of e 90 days before to to line 7.  List below ear payments for payments for payments for the payments for the payments for payments to p	not include payme an attorney for this ton 4/01/22 and even to both have primore you filed for bar ach creditor to whom or domestic support	ents for domestic supports bankruptcy case.  ery 3 years after that for arrily consumer debts on hkruptcy, did you pay a m you paid a total of \$	ort obligations, such as chor cases filed on or after the s.  any creditor a total of \$600 food or more and the total of the state of the total of t	ild support and alimony. Also e date of adjustment. or more? amount you paid that creditor	o, do not include : Do not include
<b>√</b> Yes.	* Subject  Debtor 1  During the	or Debtor 2 of e 90 days before to to line 7.  List below ear payments for payments for payments for the payments for the payments for payments to p	not include payme an attorney for this ton 4/01/22 and even to both have primore you filed for bar ach creditor to whom or domestic support	ents for domestic supports bankruptcy case. ery 3 years after that for arily consumer debts arkruptcy, did you pay a m you paid a total of \$ tobligations, such as consumer of the part of \$ tobligations are consumer of	ort obligations, such as chor cases filed on or after the s.  any creditor a total of \$600 food or more and the total child support and alimony.	ild support and alimony. Also e date of adjustment.  or more?  amount you paid that creditor Also, do not include paymen	. Do not include ts to an attorney for  Was this payment for
- -	* Subject  Debtor 1  During the	or Debtor 2 of the second of t	not include payme an attorney for this ton 4/01/22 and even to both have primore you filed for bar ach creditor to whom or domestic support	ents for domestic supports bankruptcy case. ery 3 years after that for arily consumer debts arkruptcy, did you pay a m you paid a total of \$ tobligations, such as consumer of the part of \$ tobligations are consumer of	ort obligations, such as chor cases filed on or after the s.  any creditor a total of \$600 food or more and the total child support and alimony.	ild support and alimony. Also e date of adjustment.  or more?  amount you paid that creditor Also, do not include paymen	was this payment for  Mortgage  Car
	* Subject  Debtor 1  During the No. G  Yes.	or Debtor 2 of the second of t	not include payme an attorney for this ton 4/01/22 and even to both have primore you filed for bar ach creditor to whom or domestic support	ents for domestic supports bankruptcy case. ery 3 years after that for arily consumer debts arkruptcy, did you pay a m you paid a total of \$ tobligations, such as consumer of the part of \$ tobligations are consumer of	ort obligations, such as chor cases filed on or after the s.  any creditor a total of \$600 food or more and the total child support and alimony.	ild support and alimony. Also e date of adjustment.  or more?  amount you paid that creditor Also, do not include paymen	. Do not include ts to an attorney for  Was this payment for
-	* Subject  Debtor 1  During the No. G  Yes.	creditor. Do payments to to adjustment  or Debtor 2 of the 90 days before to line 7.  List below ear payments for this bankrup	not include payme an attorney for this ton 4/01/22 and even to both have primore you filed for bar ach creditor to whom or domestic support	ents for domestic supports bankruptcy case. ery 3 years after that for arily consumer debts arkruptcy, did you pay a m you paid a total of \$ tobligations, such as consumer of the part of \$ tobligations are consumer of	ort obligations, such as chor cases filed on or after the s.  any creditor a total of \$600 food or more and the total child support and alimony.	ild support and alimony. Also e date of adjustment.  or more?  amount you paid that creditor Also, do not include paymen	was this payment for  Mortgage  Car  Credit card
	* Subject  Debtor 1  During the No. G  Yes.	creditor. Do payments to to adjustment  or Debtor 2 of the 90 days before to line 7.  List below ear payments for this bankrup	not include payme an attorney for this ton 4/01/22 and even to both have primore you filed for bar ach creditor to whom or domestic support	ents for domestic supports bankruptcy case. ery 3 years after that for arily consumer debts arkruptcy, did you pay a m you paid a total of \$ tobligations, such as consumer of the part of \$ tobligations are consumer of	ort obligations, such as chor cases filed on or after the s.  any creditor a total of \$600 food or more and the total child support and alimony.	ild support and alimony. Also e date of adjustment.  or more?  amount you paid that creditor Also, do not include paymen	was this payment for  Mortgage Car Credit card Loan repayment

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ebtor 1	Dixie	Ann	McCollur		Case n	umber (if known)		
	First Name	Middle Name	Dates of payment	e Total amount paid	Amount you still owe	Reason for this paymen	nt	
Insider's I	Name							
Number	Street							
City	State	ZIP Code						
nclude pay Mo	ments on debts guaran	teed or cosigned	by an insider.	ments or transfer any	property on account of	a debt that benefited an i	insider?	
Tes. L	ist all payments that be	neliled an Insidel	Dates of payment	Total amount paid	Amount you still owe	Reason for this paymer Include creditor's name	nt	
Insider's I	Name							
Number	Street							
City	State	ZIP Code						
D. Within 1 List all such disputes.		for bankruptcy, v sonal injury case	vere you a party in an s, small claims actions	ny lawsuit, court action s, divorces, collection s		oport or custody modificat		
		Na	ture of the case	Cou	urt or agency	Status	of the case	
Case title	Discover Bank v. Myers et al	Dixie co	lection suit	Court	ene County Circuit Court Name N Boonville Ave	☐ Pendi ☐ On ap ☐ Concl	peal	

#### Case 19-60777-can7 Doc 1 Filed 07/01/19 Entered 07/01/19 15:23:35 Desc Main Page 44 of 61 Document McCollum Debtor 1 Dixie Ann Case number (if known) First Name Middle Name Last Name Nature of the case Court or agency Status of the case collection suit Case title Capital One Bank v. Dixie Greene County Circuit Court Pending Myers et al Court Name On appeal 1010 N Boonville Ave Case number 1831-AC07250 **✓** Concluded Number Street Springfield, MO 65802-3804 City ZIP Code State collection suit Case title Capital One Bank v. Calvin Greene County Circuit Court Pending Myers Court Name On appeal 1010 N Boonville Ave Case number 1831-AC06764 **✓** Concluded Number Street Springfield, MO 65802-3804 State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property debtor wife, wages garnished. Wages garnished from Skakie, Jan 10/19/2018 thru 02/08/2019. Amount shown is for 90 02/08/2019 Creditor's Name days prior to bnkr. filing. 2135 E. Foxborough Dr. Number Street **Explain what happened** Property was repossessed. Property was foreclosed. ✓ Property was garnished. Republic, MO 65738 City State ZIP Code Property was attached, seized, or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **√** No Yes. Fill in the details. Describe the action the creditor took Date action was Amount taken

Creditor's Name

Street

State

ZIP Code

Number

City

Last 4 digits of account number: XXXX-\_\_\_\_\_\_

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otor 1	<b>Dixie</b> First Name	Ann Middle Name	McCollum Last Name		Case number (if know	n)
. Within ceiver, a ☑ No ☐ Yes	1 year before you fi custodian, or anotl	iled for bankruptcy, v her official?	vas any of your property in the	possession of an assign	ee for the benefit of cred	litors, a court-appointed
		s and Contributi	ons did you give any gifts with a to	ntal value of more than \$6	00 ner nerson?	
<b>√</b> 1No	2 years belove you	med for build aproy,	ala you give any gillo mara k	value of more than 40	oo per person.	
	Fill in the details for or with a total value of m	•	Describe the gifts		Dates you gave the gifts	Value
erson t	o Whom You Gave the	e Gift	_			
lumber	Street		-			
			_			
City	s relationship to you	State ZIP Code				
☑No ☑Yes. Gifts o	Fill in the details for o	each gift or contribution	did you give any gifts or contron.  The control on the control of	ibutions with a total value	of more than \$600 to ar  Date you contributed	y charity? Value
Charity's	Name					
Number	Street					
Number	Sileet					
City	State	ZIP Code				
	107	<b>~</b> .	Assessment of Proceedings	ala di dalam di Propinsi di		
ial Form	1 1U <i>1</i>	Sta	atement of Financial Affairs fo	i individuals Filing for Ba	пкгиртсу	

McCollum Debtor 1 Dixie Ann Case number (if known) \_ First Name Middle Name Last Name Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **√**No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your loss Value of property lost how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7 List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □No ✓ Yes. Fill in the details. Description and value of any property transferred Amount of payment Date payment or MORONEY, JAMES PATRICK transfer was made Person Who Was Paid attorney fee 02/14/2018 \$1,200.00 836 S Pickwick Ave Number Springfield, MO 65804-0130 State ZIP Code Email or website address Person Who Made the Payment, if Not You Description and value of any property transferred Date payment or Amount of payment JAMES MORONEY LAW OFFICE transfer was made Person Who Was Paid 836 S Pickwick Number Street Springfield, MO 65806 City State ZIP Code moroneylaw@hotmail.com Email or website address Person Who Made the Payment, if Not You

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Document

Case 19-60777-can7

Doc 1 Filed 07/01/19 Entered 07/01/19 15:23:35 Desc Main Case 19-60777-can7 Page 47 of 61 Document McCollum Debtor 1 Dixie Ann Case number (if known) \_\_ First Name Middle Name Last Name 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. **√**No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Number Street ZIP Code City 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **✓**No Yes. Fill in the details. Description and value of property Date transfer was Describe any property or payments received transferred or debts paid in exchange Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you \_\_\_ 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) **√**No Yes. Fill in the details. Description and value of the property transferred Date transfer was made

Official Form 107

Name of trust

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case 19-60777-can7 Doc 1 Filed 07/01/19 Entered 07/01/19 15:23:35 Document Page 48 of 61 Dixie McCollum Debtor 1 Ann Case number (if known) \_ First Name Middle Name Last Name Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. **✓**No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance closed, sold, moved, or before closing or instrument transferred transfer Name of Financial Institution XXXX- \_\_\_\_ \_\_\_\_ ☐ Checking Savings Number Street ☐ Money market Brokerage Other\_ City State **ZIP Code** 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? **✓**No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? ☐ No Name of Financial Institution Name Yes Number Number Street Street City **ZIP Code** City State **ZIP Code** 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? **√**No Yes. Fill in the details.

	Case 19-60	)777-can			Entered 07/01/19 15:23 ge 49 of 61	:35 Desc Main
ebtor 1	Dixie	Ann	МсСо		Case number (if kno	own)
	First Name	Middle N	ame Last N	Name		
			Who else has or ha	d access to it?	Describe the contents	Do you still have it?
Name of S	Storage Facility		Name			□ No □ Yes
						<b>_</b>
Number	Street		Number Street			
			City	State ZIP Code		
City	State	ZIP Code				
<b>23. Do you</b> l			omeone else owns?		you borrowed from, are storing for, or ho	old in trust for someone.
res. F	ill in the details.		Where is the prope	rty?	Describe the property	Value
Owner's N	lamo					
Owner's N	idille	I	Number Street			
Number	Street					
			City	State ZIP Code		
City	State	ZIP Code				
·						
Part 10: 0	Give Details Abo	out Environn	nental Informatio	on		
art 10.	orve Betails 718e	out Environ	nontal information	311		
■ Environ or mate		ny federal, state	e, or local statute or re		llution, contamination, releases of hazardo g statutes or regulations controlling the cle	
	eans any location, faci ng disposal sites.	ility, or property	as defined under any	environmental law, who	ether you now own, operate, or utilize it or u	sed to own, operate, or utilize it,
	lous material means a inant, or similar term.		ironmental law defines	s as a hazardous waste	e, hazardous substance, toxic substance, ha	azardous material, pollutant,
	•		that you know about	t, regardless of when t	hey occurred.	
24. Has any	governmental unit	notified you th	at you may be liable	or potentially liable un	nder or in violation of an environmental	aw?
<b>√</b> No						
☐Yes. F	ill in the details.					
Official Form 1	107		Statement of Finar	ncial Affairs for Individ	duals Filing for Bankruptcy	page 1

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otor 1	Dixie	Ann	McCollu	ım	Case number (if known)	
	First Name	Middle N	Name Last Nar	ne		
			Governmental unit		Environmental law, if you know it	Date of notice
Name of si	ite		Governmental unit			
Name of Si		·	oovernmentar unit			
Number	Street		Number Street			
			City State	ZIP Code		
City	State 2	ZIP Code				
. <b>Have yo</b> <b>√</b> 1No	u notified any gover	nmental unit	of any release of hazard	lous material?	<i>t</i>	
☐Yes. Fi	ill in the details.					
			Governmental unit		Environmental law, if you know it	Date of notice
Name of si	ite		Governmental unit			
Name of Si		·	Governmental unit			
Number	Street		Number Street			
			City State	ZIP Code		
City	State Z	ZIP Code				
. <b>Have yo</b> <b>∑</b> 1No	u been a party in any	y judicial or a	dministrative proceeding	g under any e	environmental law? Include settlements and order	S.
	ill in the details.					
			Court or agency		Nature of the case	Status of the cas
Case title						Pending
		(	Court Name			☐On appeal
		 !	Number Street			Concluded
Case numl	ber					

State ZIP Code

City

Case 19-60777-can7 Doc 1 Filed 07/01/19 Entered 07/01/19 15:23:35 Desc Main Document Page 51 of 61 Dixie McCollum Debtor 1 Ann Case number (if known) First Name Middle Name Last Name Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Name Number Street Dates business existed Name of accountant or bookkeeper \_ To \_ City State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. **√**No Yes. Fill in the details below. Date issued MM / DD / YYYY Name

Number

City

Street

State

**ZIP Code** 

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Case number (if known)\_

McCollum

Debtor 1

Dixie

Ann

First Name Middle Name Last Name Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Dixie Ann McCollum, Debtor 1 Date 07/01/2019 Date\_ Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? √No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? **√**No Attach the Bankruptcy Petition Preparer's Notice, Yes. Name of person \_\_\_ Declaration, and Signature (Official Form 119).

1.000	111611// 05	n / 1100 1		Lptorog	J//U1/19 15:23:35	Desc Main	
Fill in this information t	to identify your case:				1701/13 13.23.33	Desc Main	
Debtor 1	Dixie	Ann	McCollum				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankru	ptcy Court for the:	w	estern District of Missouri				
Case number (if known)						Check if this is an amended filing	

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims								
	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.							
	Identify the cree	ditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?				
	Creditor's		☐ Surrender the property.	☐ No				
	name:	Home Point Finance	Retain the property and redeem it.	<b>√</b> Yes				
	Description of property securing debt:	homestead for Dixie Myers & children 2521 N. Benton Ave Springfield, MO 65803	Retain the property and enter into a Reaffirmation Agreement.					
			Retain the property and [explain]:					
	Creditor's		☐ Surrender the property.	<b>☑</b> No				
	name:	Skakie, Jan	Retain the property and redeem it.	Yes				
	Description of property		Retain the property and enter into a Reaffirmation Agreement.					
	securing debt:		Retain the property and [explain]:					

Debtor 1

Case 19-6077	77-can7 I	Doc 1	MaCallina	1/19	Entered 0	7/01/19 15:	23:35 ber (if know)	Desc Main	
First Name	Middle Na	me	Document -	Page	<del>e 54 o</del> f 61		,	,	

Creditor's name:	Discover Bank	<ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>	☑ No ☐ Yes
Description of property		Retain the property and enter into a Reaffirmation Agreement.	<b>3</b>
securing debt:		Retain the property and [explain]:	
Creditor's		☐ Surrender the property.	<b>☑</b> No
name:	Capital One Bank, N.A.	Retain the property and redeem it.	☐ Yes
Description of property securing debt:		Retain the property and enter into a Reaffirmation Agreement.	
securing debt.		Retain the property and [explain]:	
Creditor's		☐ Surrender the property.	<b>☑</b> No
name:	Capital One	Retain the property and redeem it.	☐ Yes
Description of property securing debt:		Retain the property and enter into a Reaffirmation Agreement.	
scouring dobt.		Retain the property and [explain]:	

Debtor 1

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Describe your unexpired personal property leases	Will the lease be assumed?
	Will the lease be assumed?  ☐ No
essor's name:	
escription of leased	☐ Yes
roperty:	
essor's name:	☐ No
	☐ Yes
escription of leased	<b>-</b> 1.55
operty:	
essor's name:	☐ No
	Yes
lescription of leased roperty:	
essor's name:	☐ No
escription of leased	Yes
roperty:	
essor's name:	☐ No
escription of leased	<b>-</b>
roperty:	
essor's name:	☐ No
	Yes
lescription of leased roperty:	
essor's name:	☐ No
escription of leased	Yes
roperty:	
3: Sign Below	
der penalty of perjury, I declare that I have indicated my intention about any property o subject to an unexpired lease.	f my estate that secures a debt and any personal property that
outjeet to an unexpired lease.	

Date <u>07/01/2019</u>

MM/ DD/ YYYY

MM/ DD/ YYYY

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B2030 (Form 2030)(12/15)

# United States Bankruptcy Court Western District of Missouri

In	re					
Мс	cCollum, Dixie Ann	Case No				
De	ebtor(s)	Chapter	7			
	DISCLOSURE OF COMPENSATION O	F ATTORNEY FOR DEBTO	)R			
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify compensation paid to me within one year before the filing of the perendered or to be rendered on behalf of the debtor(s) in contemplation	etition in bankruptcy, or agree	ed to be paid to me, for services			
	For legal services, I have agreed to accept		\$0.00			
	Prior to the filing of this statement I have received	· · · · · · · · · · · · · · · · · · ·	\$0.00			
	Balance Due		\$0.00			
2.	The source of the compensation to be paid to me was:					
	☑ Other (specify)					
3.	The source of compensation to be paid to me is:					
	☑ Debtor ☐ Other (specify)					
4.	☑ I have not agreed to share the above-disclosed compensation w of my law firm.	rith any other person unless th	ney are members and associates			
	☐ I have agreed to share the above-disclosed compensation with a of my law firm. A copy of the agreement, together with a list of the n					
5.	In return for the above-disclosed fee, I have agreed to render legal s	service for all aspects of the b	ankruptcy case, including:			
	<ul> <li>Analysis of the debtor's financial situation, and rendering adv bankruptcy;</li> </ul>	rice to the debtor in determin	ing whether to file a petition in			
	<ul><li>b. Preparation and filing of any petition, schedules, statements of a</li><li>c. Representation of the debtor at the meeting of creditors and con</li></ul>	,	•			
			ourned hearings thereor,			
6.	By agreement with the debtor(s), the above-disclosed fee does not in	nclude the following services:				
	CERTIFICATION	 ON				
	I certify that the foregoing is a complete statement of any agreement or arrangement for					
	payment to me for representation of the debtor(s) in		ement for			
	07/01/2019 /s/ JAMES PATE	RICK MORONEY				
	Date Signature of					
	JAMES MORON	NEY LAW OFFICE				

Name of law firm

ГШ	in this information to	identify your case:						eck one box 2A-1Supp:	conly as directed in this ic	illi alid illi olili
De	ebtor 1	<b>Dixie</b> First Name	Ann Middle Name	McCollum Last Name			<b>⊴</b>	1. There is	no presumption of abuse.	
(S Ur	ebtor 2 pouse, if filing) nited States Bankrupt	First Name cy Court for the:	Middle Name We	Last Name stern District of M	issouri			abuse appli Test Calcui 3. The Mea	ulation to determine if a pes will be made under <i>Clation</i> (Official Form 122 <i>f</i>	napter 7 Means A-2). w because of
	known)							qualified mi	ilitary service but it could	apply later.
Of	ficial Form	122A-1						Check if th	is is an amended filing	
Ch	napter 7 S	tatement	of Your (	Current M	/lonthly	/ Inc	ome	<u> </u>		12/15
sepa num nilita	arate sheet to this for hber (if known). If you	rm. Include the line r u believe that you ard e and file Statement	number to which the exempted from a for the front of the	ne additional inforr presumption of al	nation applies ouse because	s. On the you do i	top of ar	y additiona primarily co	curate. If more space is al pages, write your nam onsumer debts or becau 2A-1Supp) with this for	ne and case use of qualifying
1.		al and filing status?	-							
••		out Column A, lines	-							
	☐ Married and you	r spouse is filing wit	h you. Fill out both	Columns A and B, I	lines 2-11.					
	☐ Married and you	r spouse is NOT filin	ng with you. You an	d your spouse are	):					
		e same household a		•						
	penalty of p		our spouse are legally	y separated under r	nonbankruptcy	law that a	applies or		ox, you declare under d your spouse are living	
	101(10A). For exa during the 6 month	mple, if you are filing ones, add the income for	on September 15, th r all 6 months and di	ne 6-month period wide the total by 6. I	ould be March Fill in the result	n 1 throug t. Do not i	h August nclude an	31. If the any income ar	le this bankruptcy case. nount of your monthly incomount more than once. Fort for any line, write \$0 in	ome varied or example, if
							Column A  Debtor 1		Column B  Debtor 2 or non-filing spouse	
2.	Your gross wages, s payroll deductions).	salary, tips, bonuses,	, overtime, and con	nmissions (before	all			52,775.38		
3.	Alimony and mainted spouse.	enance payments if	Column B is filled i	n. Do not include pa	ayments from a	a		\$75.00		
4.	an unmarried partner	<b>ling child support.</b> In r, members of your ho ributions from a spou	nclude regular contr ousehold, your deper	ributions from ndents, parents, and	d roommates.	our		\$150.00		
5.	Net income from op farm	perating a business,	, profession, or	Debtor 1	Debtor 2					
	Gross receipts (befo	ore all deductions)		\$0.00						
	Ordinary and necess	sary operating expens	ses	- \$0.00 -						
	Net monthly income	from a business, prof	fession, or farm	\$0.00		Copy here →		\$0.00		
6.	Net income from re	ental and other real p	property	Debtor 1	Debtor 2					
	Gross receipts (befo	ore all deductions)		\$0.00						
	Ordinary and necess	sary operating expens	ses	- \$0.00 -						
	Net monthly income	from rental or other re	eal property	\$0.00		Copy here →		\$0.00		
	7. Interest, divide	ends, and royalties						\$0.00		

Debtor 1 Case 19-60777-can7 Doc 1 Filed 07/01/19 Entered 07/01/19 15:23:35 Desc Main Doc 1 First Name Middle Name Doc 1 Page 58 of 61

		First Name - Middle Name	Last Name						
				Column A  Debtor 1	Column B  Debtor 2 or  non-filing spouse				
	8.	Unemployment compensation		\$0.00					
		Do not enter the amount if you contend that the	amount received was a benefit under						
		the Social Security Act. Instead, list it here:	\						
		For you	\$0.	00					
		For your spouse	<u></u>	_					
	9.	<b>Pension or retirement income.</b> Do not include under the Social Security Act.	any amount received that was a benefit	\$0.00					
	10.	Income from all other sources not listed ab Do not include any benefits received under the as a victim of a war crime, a crime against hur terrorism. If necessary, list other sources on a	Social Security Act or payments receive manity, or international or domestic	d					
	Tota	al amounts from separate pages, if any.		+	+				
	44	Calculate value total augment monthly income	Add lines 2 through 10 for each	\$3,000.38		= \$3,000.38			
	11.	Calculate your total current monthly income column. Then add the total for Column A to the			+	Total current			
						monthly income			
						-			
De	rt 2	Determine Whether the Means Tes	et Annlies to Vou						
		ulate your current monthly income for the year	·		0 11 441	¢2,000,20			
	12a.	Copy your total current monthly income from line			Copy line 11 here →	\$3,000.38			
		Multiply by 12 (the number of months in a year)	).		_	<b>x</b> 12			
	12b.	The result is your annual income for this part of	the form.		12b.	\$36,004.56			
13.	Calcu	ulate the median family income that applies to	you. Follow these steps:						
	Fill in	the state in which you live.	Missouri						
	Fill in	the number of people in your household.	3						
	To fin	the median family income for your state and siz d a list of applicable median income amounts, g actions for this form. This list may also be availab	o online using the link specified in the se	pparate	13. [	\$72,980.00			
14.	How	do the lines compare?							
		☑Line 12b is less than or equal to line 13. On the Go to Part 3.		, ,					
	14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2</i> . Go to Part 3 and fill out Form 122A-2.								
Pa	rt 3								
	Ву	signing here, I declare under penalty of perjury	that the information on this statement and	d in any attachments is true a	and correct.				
	X	, . /s/ Dixie Ann McCollum	X						
		Signature of Debtor 1	-	Signature of Debtor 2					
		Data 97/04/04/0	_	N-1-					
		Date 07/01/2019 MM/DD/YYYY	L	DateMM/DD/YYYY					
		101101/DD/1111							
1									
	If y	rou checked line 14a, do NOT fill out or file Form	122A-2.						

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IN RE: McCollum, Dixie Ann CASE NO

CHAPTER 7

<b>VERIFICATION OF</b>	CREDITOR	MATRIX

	VERIFICATION OF CREDITOR MATRIX						
The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.							
Date	07/01/2019	Signature	/s/ Dixie Ann McCollum Dixie Ann McCollum, Debtor				

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